



# *The Pillar*

Newsletter of the Lambda Pi Chapter, University of Toronto Faculty of Nursing

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Volume 11, Number 1

Fall, 2000

## *Spring Scholarly Program*

*Guest Speaker: Dr. Gail Mitchell, RN, PhD.*

*Chief Nursing Officer of Sunnybrook and Women's College Hospitals*

### *The Paradox of Leadership*

*By Isolde Daiski, RN, BScN, M.Ed.*

In her inspiring address at this year's spring induction Dr. Mitchell discussed the paradox of leadership that nursing currently faces. Paradoxes, conventionally defined as apparent opposites, can be viewed alternatively as different aspects of the same phenomenon. Examining paradoxes of nursing leadership can stretch thinking, provide new insight and help us move towards novel and visionary approaches.

For nurses, Dr. Mitchell stated, the present can be viewed simultaneously as both "the best and the worst of times". The anti-discipline sentiment that pervaded the 90's restructuring process brought forth attempts to reduce caring to a string of task sequences. We now seem to be moving towards a new appreciation of the contribution of nurses. Leadership development of nurses is occurring in all institutional realms. The baccalaureate as entry to practice will provide nurses with educational backgrounds needed to

transform nursing and health care. These developments help us view the present optimistically as one of the "best of times" for nursing.

The "worst of times" is reflected most significantly in the number of nurses who no longer find meaning in their work. Casualization of the work force, the upheaval of lay-offs, the lack of funding and planning has all contributed to a loss of security and burnout. Nurses take pride in the important differences they make in the lives of individuals and families yet the standard of nursing care may be often compromised within the context of the current health care system.

Dr. Mitchell also discussed some of the specific paradoxes that she, as Chief Nursing Officer experiences daily. Within an ever-increasing tendency towards funding of technology over human service, she is challenged to negotiate between discipline specific and stewardship interests. She must try to

align simultaneously with the senior team as well as the front line staff. Faced with increasing needs but decreasing resources she strives to balance the cost of quality with the quality of cost. Dr. Mitchell feels her greatest challenge is to walk the line between respecting tradition and jolting traditional thought. She cited nursing diagnosis and behavior modification as examples of rigid, prescriptive traditional practices that sometimes obscure other possibilities and hinder creative thinking.

Dr. Mitchell believes nursing leadership needs new visioning. She feels the most significant challenge for nurses right now is to address not only acts of commission but also acts of omissions in nursing care - most significantly lack of compassion. How can we become accountable, not only for what we do, but also for things we do not do?

To help nurses recognize and engage with paradoxes, our leadership has to support continued dialogue underpinned through thoughtful research. As an example of a paradoxical experience living with diabetes shows that a rigidly regulated life is made possible by the periodic abandoning of all its restrictions. More knowledge about paradoxical lived experiences can lead to new ways for nurses to be with clients and to radically change nursing practice.

In conclusion, Dr. Mitchell reiterated that in the new age of nursing leadership we need novel visions. We need to explore the paradoxes of community, networks and partnerships with others

### ***INDUCTEES LAMBDA PI CHAPTER, MAY 2000***

**Manoj Bala  
Georgiana Kathleen Beal  
Jane Benedict  
Susan Calabrese  
Sandra Caruthers  
Yvonne Chen  
Rita Chin  
Nancy Cohen  
Ritu Dutta  
Jason Robert Efford  
Angela Grant  
Catherine Hardie  
Carol Ann Holmes  
Maki Iwase  
Susan Kagan  
Theo Lancee**

**Joanne Louis  
Maureen Markle-Reid  
Rosebud Mayanja  
Michal Moskoff  
Victoria Elizabeth Pennick  
Patricia Raine  
Lesley Reid  
Michelle Sandquist  
Myra Saraza-Pacheco  
Vidhya Sivanantham  
Jean Smyth  
Lilianna Stefanczyk-Sapieha  
Carol Taub  
Donna Thomson  
Dean Walters  
Andrea Young**

# The Mentor – Protégé Program

For leadership development in Nursing

## LAMBDA PI CHAPTER



SIGMA THETA TAU

INTERNATIONAL HONOR  
SOCIETY OF NURSING



This is a program to connect experienced nurse leaders, who are interested in sharing their knowledge and fostering leadership skills with less experienced nurses.

Mentors – Nurses who:

- Are self-identified and/or invited to participate,
- Have made a significant contribution to nursing,
- Possess knowledge and skills from a variety of nursing spectrums,
- Are motivated to take an active interest in the protégé's professional development, and
- Will function as a coach, resource person and role model.
- Are interested in becoming involved in chapter activities.

## Protégé – Nurses who:

- Are looking for an experienced colleague to guide and support them as they grow professionally,
- Have a desire to learn new strategies for professional development,
- Would like an increased awareness of career options, and
- Are interested in becoming involved in chapter activities.

## How to join as Mentor or Protégé

If you have questions, please contact

Heather Beanlands –Chair, Mentorship committee

416-979-5000, ext. 6312 or [hbeanlan@acs.ryerson.ca](mailto:hbeanlan@acs.ryerson.ca).

or

Janice Waddell – President, Lambda Pi

416-979-5000, ext. 6300 or [jwaddell@acs.ryerson.ca](mailto:jwaddell@acs.ryerson.ca).

## Lambda Pi Chapter Mentorship Committee:

- \*Irene Andress – Toronto East General Hospital,
- \*Lara Babahekian- Region of Peel Public Health,
- \*Jeff Baine – Hospital for Sick Children,
- \*Heather Beanlands –Ryerson Polytechnic University,
- \*Diane Buchanan - Baycrest Center,
- \*Maureen Cava –Cancer Care Ontario,
- \*Janice Waddell – Ryerson Polytechnic University,
- \*Mary M. Wheeler – Donner & Wheeler and Associates.

Thank you for your participation!

***Sigma Theta Tau, Lambda Pi Chapter  
Calendar of Events***

<b>Date</b>	<b>Event</b>	<b>Location</b>
Nov. 22, 2000 5 pm.	New Member Orientation Lambda Pi Fall Scholarly Program Guest Speaker: Colleen Shelton	TBA
Winter 2110	Winter Scholarly Program and Annual General Meeting	TBA
May 2-4, 2001	“Nursing in a Complex World: An International Nursing Research Conference”. Faculty of Nursing, University of Toronto <b>Keynote Speakers:</b> <b><i>Dr. Franco Carnevale</i></b> <b><i>Dr. Mel Chevannes</i></b> <b><i>Professor Sally Thorne</i></b> <b><i>Professor Nancy Fugate Woods</i></b>	Toronto Colony Hotel, 89 Chestnut Ave. Toronto
May, 2001	Lambda Pi Chapter at Large Chartering Ceremony. University of Toronto and Ryerson Nursing Society	TBA
June 8-9, 2001	STTI 12 <sup>th</sup> International Nursing Research Congress: Clinical Scholarship, Technology, and Globalization	Copenhagen, Denmark
Nov. 10-14, 2001	STTI Biennial Convention	Indianapolis, Ind.



# Congratulations!

Over the summer, we received notification from Sigma Theta Tau Headquarters that our application to form a Chapter-at-Large with the Ryerson School of Nursing Honour Society was approved at the summer meeting of the Board. Sincere thanks and appreciation to all Lambda Pi and Ryerson Honour Society members who worked so diligently to help make this approval a reality. This winter, a liaison committee, comprised of members from each involved constituency, will work through the details of joining the two groups. A Chartering Ceremony is planned for the Spring of 2001.

Linda Cooper

## *Chapter Information*

### *Contacting Lambda Pi*

Information about events and all related applications are available from the School of Nursing, Ryerson Polytechnic University. Please leave a message with your request at (416) 979-5300. We can also be reached at [ncherry@ryerson.ca](mailto:ncherry@ryerson.ca).

### *Invitation to Chapter Events*

A reminder: all chapter events are open to members and their guests. Please feel free to bring a friend or colleague to all local sessions.

### *STTI Online:*

STTI has launched a new electronic educational program for nurses. Nurses are encouraged to participate in *Online Case Studies for Nurses* not only as learners but also as authors of peer-reviewed case studies. Further information and guidelines for writing case studies are found at [www.nursingsociety.org](http://www.nursingsociety.org).

*STTI Online Literature Review for Nurses* offers paid subscriptions to nurses for concise updates prepared by clinical experts of key articles in your subject areas as well as access to the entire database. Contact [www.nursingsociety.org/online](http://www.nursingsociety.org/online) for details.

### *Contacting STTI Headquarters*

Members may contact Sigma Theta Tau International Headquarters in Indianapolis directly by calling 1-888-634-7575 or e-mailing [stti@stti-sun.iupui.edu](mailto:stti@stti-sun.iupui.edu).

STTI also can be contacted through its website: [www.nursingsociety.org](http://www.nursingsociety.org). Members can complete and submit a change of address online from the STTI website under the MOVED section.



## ***President's Message***

***by: Janice Waddell***

It is our hope that the chapter activities for the coming year acknowledge both our individual and collective accomplishments, and respond to the needs and interests of Lambda Pi members. Thanks to Heather Beanlands, and the mentorship committee, our mentorship program is up and running. The insert describes the program and how you can become involved, either as a mentor or a protégé. Our second orientation program will be held around the time of our fall scholarly program. The primary goal of the orientation program is to introduce new members to the benefits of membership in the chapter, and Sigma Theta Tau International. The orientation meeting also allows new and existing members to meet one another and have a visit over pizza and refreshments. Everyone is welcome to attend the orientation. Last year, long-term Lambda Pi members found that participation in the 1999/2000 orientation session served to remind them of many valuable membership benefits and resources. Details of the coming orientation will be sent to all members in early November.

In response to requests from our colleagues working in clinical settings, our 2000/2001 scholarly programs will have an emphasis on current clinical practice issues and activities. You will find information on the fall program enclosed in this newsletter. We hope that you will come *and* bring a colleague, or two, with you! Again, in response to member feedback, we have scheduled the programs in the early evening so that participants can head home at a reasonable hour.

Finally, we are busy planning for the Chartering ceremony for the celebration of our Chapter-at-Large status with the Ryerson School of Nursing Honour Society. See Linda Cooper's update on the Chartering plans.

Please feel free to contact me, or any member of the Lambda Pi Board of Directors, with your suggestions for future chapter activities, or if you wish to become involved in current chapter initiatives.

### ***Call for Abstracts – Delta beta Chapter***

19<sup>th</sup> Research Program

Nursing Research for the 21<sup>st</sup> Century

March 24, 2001

Tampa, Florida

For further information <http://utweb.utampa.edu/org.deltabeta/home.html>

## ***The Lambda Pi Mentor – Protégé Program*** ***by Heather Beanlands***

The Lambda Pi Mentor-Protégé program was officially launched at our induction ceremony in May of this year. This exciting new program is designed to offer formal opportunities to connect experienced nurse leaders with nurses who are less experienced or who wish to expand their knowledge in relation to a particular aspect of professional nursing. At present we are just beginning to set up linkages between Lambda Pi members who have expressed an interest in being either a mentor or a protégé. We welcome applications from other members who may wish to become involved in this program. If you are a nurse with knowledge and skill in a particular aspect of nursing practice, research, education and/or administration and would like to function as a resource person and role model for a nurse with less experience we invite you to consider becoming a mentor. On the other hand, if you are a nurse looking for guidance and support from an experienced colleague you may benefit from being a protégé.

Including in this issue of the Pillar is a flyer describing the Mentor- Protégé program in greater detail. If you are interested in receiving more information or becoming more involved in the program please contact Heather Beanlands at 979-5000 ext 6312 or [hbeanlan@acs.ryerson.ca](mailto:hbeanlan@acs.ryerson.ca), or speak with one of the members of the mentorship committee. All ideas and suggestions for how this Mentor-Protégé program might best meet members needs will be gratefully accepted.

Respectfully submitted by Heather Beanlands for the Lambda Pi Chapter Mentorship Committee: Irene Andress, Lara Babahekian, Jeff Baine, Diane Buchanan, Maureen Cava, Janice Waddell, and Mary M. Wheeler.

### ***Honours and Awards***

**Dr. Dorothy Pringle**, RN, PhD., Professor, Faculty of Nursing, University of Toronto has received the Jeanne Mance Award. The award, considered the highest award for nursing in Canada, is given to a registered nurse who has made a significant and innovative contribution to the health of Canadians, and whose activities at the national and international level have resulted in increased status and public recognition of the nursing profession.

**Dr. Margaret Fitch**, RN, PhD., has been elected the President-Elect of the International Society of Nurses in Cancer Care. Dr. Fitch, who has been on the Board of the ISNCC for the past 8 years, will assume this position in August at the International Conference on Cancer Nursing in Oslo, Norway.

**Dr. Linda O'Brien-Pallas**, RN, PhD., Professor and Co-Principal Investigator,



# Lambda Pi Chapter (U of T) and the Ryerson School of Nursing Honour Society

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Fall Scholarly Program

**"The gender lens: Examining bias in nursing  
practice and research"**

guest speaker

**Colleen Shelton**

**Clinical Nurse Specialist  
Toronto General Hospital**

**Monday, December 4, 2000**

1700 hrs. - Light Refreshments

1730 hrs. - Guest Speaker

**Ryerson Polytechnic University  
Room A250  
380 Victoria Street  
(enter off Gerrard Street)**

Please join us!

Honour Society events are open to students, members and guests



Nursing Effectiveness, Utilization and Outcomes Research Unit, Faculty of Nursing, University of Toronto has been named as the first recipient of the Canadian Health Services Research Foundation/Canadian Institutes of Health Research "Nursing Human Resources Chair". Dr. O'Brien-Pallas will lead a program of education and research focused on developing knowledge of health human resources and related policy making.

**Dr. Bonnie Stevens, R.N., Ph.D.,** Professor, Faculty of Nursing, University of Toronto has been appointed the inaugural holder of the Signy Hildur Eaton Chair in Pediatric Nursing Research at the Hospital for Sick Children. This is the first chair of pediatric nursing research in Canada. Dr. Stevens has conducted numerous research studies on pain assessment and management in infants and children and will maintain these research foci as the central theme in the development of her program of research within her new role.

Dr. Stevens has also recently been awarded the International Association for the Study of Pain, Astra Zenica Young Investigator Award for research in pediatric pain. The award was presented at the International

Symposium in Pediatric Pain in London, England in June 2000.

**Linda McGillis Hall** has been appointed Chair of the 2000-2001 Regional Research Utilization Award Judging Committee of Sigma Theta Tau International. Committee members include Elizabeth Peter and Peggy White.

**Ruth Lee** has successfully completed her PhD from the Institute of Medical Science, University of Toronto.

**Mary Jane Espen** has recently received the Research Scientist Career Award from the National Cancer Institute of Canada for her research into Genetic Predisposition to Cancer: Building Interventions for Individual and Family

**Karima Velji** of Princess Margaret Hospital was awarded the 1999 CANO Pharmacia Upjohn Award of Excellence in Oncology Nursing Practice.

**Amy McCutcheon, RN, MN,** has received the 2000/2001 Academy of Canadian Nurse Executives (ACEN) Scholarship for doctoral study. Amy has served on the Board of Directors of Lambda Pi chapter as the immediate past-secretary.

### *Members on the Move*

**Dr. Linda O'Brien-Pallas, RN, PhD.,** Professor and Co-Principal Investigator, Nursing Effectiveness, Utilization and Outcomes Research Unit, Faculty of Nursing, University of Toronto recently returned from a visit to Japan where she provided consultation with various nursing groups and universities with respect to nursing health human resources.

**Gail Donner** and Mary Wheeler have been working with the International Council of Nurses to develop an international carer program for nurses. They have written a document



## News Briefs

### Membership numbers on the rise

Sigma Theta Tau provided service to more than 134,000 members worldwide last year. What's contributed to this increase? "During the past year, we have introduced some exciting new products and services," explains Nancy Dickenson-Hazard, Sigma Theta Tau Executive Officer. "More importantly, we have expanded our online communication options, improved responsiveness to member requests and enhanced record keeping."

### Largest gift in Sigma Theta Tau history

Philanthropist Ruth Lilly has given a \$2 million contribution to expand Sigma Theta Tau International's electronic library. Ms. Lilly's gift, the largest single gift in the 78-year history of Sigma Theta Tau, will help nurses worldwide get the information they need to conduct research, serve patients and control health care costs.

### Pssst...Pass it on!

Nurses who missed the opportunity to join as students are able to accept the honor of membership as community leaders. Nominate your nursing colleagues with bachelor's degrees to your local chapter or encourage them to contact headquarters by calling 1.888.634.7575 (U.S. and Canada) or +800.634.7575.1 (International).

### The art of nursing

Encouraging prospective students to pursue a nursing career is more important than ever. To promote the opportunities nursing provides, Sigma Theta Tau International offers the "Art of Nursing" brochure. Call 1.888.634.7575 for copies.

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Sigma Theta Tau International Honor Society of Nursing

# EXCELLENCE

in Clinical Practice

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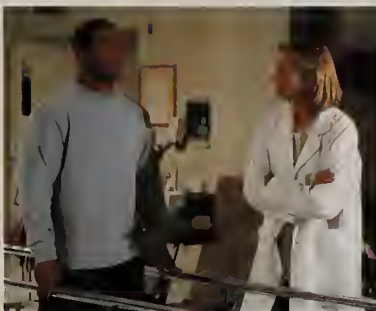
## Rehabilitation nursing

### Another increasing shortage

By Marlene Ruiz

When analyzing where the nursing shortage is most critical, rehabilitation nursing rises to the top. Kathy Dunn, RN, MS, CRRN-A, a twenty-five-year veteran in this field of practice, explains that like operating room nursing, rehabilitation nursing is an area to which few nursing students are exposed during clinical experience in their educational programs. Without this experience, students and new graduates often have little experience with or serious misconceptions of rehabilitation nursing.

It's true that rehabilitation nursing requires a lot of the individual. It is often physically challenging and demands specialized training. Nurses in the field have special education in patho-physiology, body and behavioral deficits, differentiation of brain and spinal cord injuries, psychosocial aspects, skin care, bowel and bladder training, sexuality, activities of daily living, assistive devices, body mechanics, and



By helping patients set attainable goals, rehabilitation nurses encourage patients' independence.

transfers. Rehabilitation nurses also must have excellent skills assessing their clients, since most patients are not able to verbalize their symptoms.

While rehabilitation nursing is demanding, it is also rewarding. "I learned more about nursing clinically in my first week at Spinal Cord Injury (SCI) than I did in three semesters of clinical through school," said Kate Schreiber, RN, BSN, a new graduate. "The rehab nurses were accustomed to teaching and made me feel an important and integral part of the team."

One of her first clients was a 60-year-old man. While visiting his wife in the intensive care unit, an abdominal aneurysm ruptured. He was rushed to the operating room but lost use below the T8 level. The man was placed next to his wife in the ICU, but she died shortly after his transfer before he had an opportunity to speak with her. When he awoke, he experienced the trauma of having lost both his wife and his legs. Despite the overwhelming loss and persistent depression, he recovered. He now is able to accomplish all his

REHABILITATION NURSING, PAGE 3 ➤

## Nursing: An international student's perspective

By Wan Hyuck Kim

When I began the six-week internship at Kaiser Permanente Hospital in San Diego, I was excited about the opportunity. I already possessed more than three years of experience in clinical nursing at Seoul National University Hospital, one of only a few tertiary care hospitals in Korea. I looked forward to learning more about nursing in the United States and exploring the difference between American and Korean hospitals.

As a graduate student in Health Service Administration, I discovered many things. First, I found that nursing in this country is often what distinguishes hospitals from one another. The quality and unique characteristics of the hospitals are determined by the quality of nursing and the professionalism of its nurses.

*"I found that nursing in this country is often what distinguishes hospitals from one another."*

During my internship, I was also able to explore the Dialysis Center and Outpatient Treatment Center. This gave me a great opportunity to compare clinical nursing in the United States and in Korea. The first thing that struck me was the number of patients in the care of each nurse. In Korea, I often cared for 17 to 20 patients, while nurses here cared for far fewer. Taking care of a manageable number of patients means nurses can provide the highest quality care. It makes it possible for nurses to spend their time supplying direct care. I also discovered that patients are not considered a member of a group with the

## Nurses and the 'net

### The Internet resource for clinicians

By Cheryl Hall Harris

The Internet often brings to mind e-mail, shopping and news. But what about nursing? Placed within the context of your clinical practice, the World Wide Web is a phenomenal resource for nurses.

The Internet provides an almost infinite variety and scope of health data, from simple advice about wellness to the most obscure information about extremely rare diseases. Web sites abound that address mental, spiritual and physical dimensions of health, multicultural aspects of nursing practice and clinical ethics. There are several techniques for finding the specific information you require.

#### The Power of Search Engines

Because the Internet is vast, making efficient use of your time locating information requires skill and some extremely powerful search tools. If you have spent time "surfing the 'net," you're probably already aware of search engines such as Yahoo!, Excite<sup>SM</sup> and Lycos<sup>®</sup> for generating Web sites to explore. Since every search engine is configured somewhat differently, each may retrieve distinct Web sites. Although there could be some overlap, using several search engines improves your probability of finding the specific information you seek.

To increase your ability to find relevant sites, enter your search terms on one of the metasearch engine sites such as Dogpile<sup>SM</sup> at [www.dogpile.com/](http://www.dogpile.com/). Using as many as 24 single search engines, Dogpile<sup>SM</sup> reports the results of each search engine in a separate list. If you determine one search engine returns the most relevant results, continue reviewing Web sites produced by that engine. Intelliseek<sup>TM</sup> at [www.intelliseek.com/](http://www.intelliseek.com/) allows you to narrow your search to a health channel before entering your



*"Placed within the context of clinical practice, the World Wide Web is a phenomenal resource for nurses."*

search term and then ranks results according to how closely they meet your parameters.

#### Following Hypertext Links

Another method of finding relevant information is to employ hypertext links using a credible site as a "jumping off place." The Sigma Theta Tau International Web site at [www.nursingsociety.org/](http://www.nursingsociety.org/) provides links to other reliable sites via the "Global Opportunities" button. NursingWorld,

NURSES AND THE 'NET, PAGE 3 ➤





# Forensic nurses merge nursing practice and the law

By Rita Colella

Historically, nurses always have had the ability to recognize needs and to take the leadership role in enhancing the quality of life. The specialty of forensic nursing is no exception.

Found in correctional facilities, courts and clinical settings, forensic nurses specialize in nursing practice and the law. Often forensic nurses work with domestic violence and rape victims and testify in court.

### A SANE Program for Victims

Although nurses have been working with victims and the law for more than 20 years, the American Nurses Association (ANA) recognized forensic nursing as a specialty only as recently as 1995.

Currently, the largest sub-specialty of forensic nursing is Sexual Assault Nurse Examiners (SANEs). SANEs are trained in forensic evidence collection techniques, which include the identification of trauma utilizing a

colposcope, alternative light sources, photography and other sophisticated documentation methods. As nurses, SANEs are in a unique position to skillfully perform the forensic examination, as well as provide the victim with the emotional support needed to ease the victim during the healing process. The potential for further trauma is decreased with the SANE's technical skill and ability to interact empathetically with victims. Having a qualified SANE nurse on staff allows evidence to be collected in a sensitive, effective and technologically advanced method.

The goals of SANE intervention are uniform across the country. Key aspects of the forensic examination include:

- assessment of trauma;
- objective documentation of health history, victim's statement and history of the crime;
- assessment of medical, psychological and social risk of medical sequelae;



Specializing in nursing practice and the law, forensic nurses often work with domestic violence and rape victims and testify in court.

- collection and preservation of forensic data; and
- facilitation of victim control over assault issues.

As patient advocates, SANEs fulfill an ethical obligation to ensure that the victim has the opportunity to make an informed decision about treatment choices. This ensures that basic human

rights to dignity and privacy are protected.

### Becoming a SANE

To practice as a SANE, one must be a registered nurse with documented continuing education in the forensic nursing evaluation of victims of sexual assault (SANE Standards, 1996). Most states have developed additional requirements specific to their state and counties. For instance, in 1998 the New Jersey attorney general published "The Standards for Providing Services to Survivors of Sexual Assault." These guidelines now provide a framework for SANEs to practice within a Sexual Assault Response Team (SART). The team is typically made up of a SANE, a rape crisis counselor and a member of law enforcement.

There are approximately 300 SANE/SART programs in operation across the United States. Since SANEs' education,

FORENSIC NURSING, PAGE 4 ➤

# Career profiles in clinical practice

Name: Teresa Nimmer Vogel, RN, BSN

Title: Staff RN

Employer: Elmbrook Memorial Hospital, Covenant Healthcare Systems

Years in Nursing: 19



Teresa Nimmer Vogel

### Three favorite aspects of job:

- Direct patient contact
- Positively influencing patients' health outcomes
- Educating patients and their families

### Three challenging aspects of job:

- Having enough energy and time
- Securing adequate resources
- Keeping current with research and technology via conferences and seminars

### Job description:

Medical telemetry, cardiopulmonary, oncology and general medical-surgical responsibilities.

### Education:

- Nursing Diploma, 1981, Columbia College of Nursing
- BSN, 1991, Marquette University, Milwaukee, Wis.

### Sigma Theta Tau Chapter:

- Delta Gamma Chapter

### Best advice:

"Become vital and active members of your nursing organizations at the hospital, clinic and community at local, state or national levels. Make a difference for nursing."

### How Sigma Theta Tau has shaped her career:

"Sigma Theta Tau international has been influential in shaping my leadership abilities. It has given me the knowledge, skills and confidence to chair performance improvement and quality assurance activities at a major teaching center; to become a mentor/preceptor to nursing students and new employees; and to participate as a board member in the local chapter. Through Sigma Theta Tau conferences, I have gained the knowledge and skills to actively pursue a career change within nursing. Sigma Theta Tau has also provided great exposure to other nurses from across the United States and around the world."

Teresa Nimmer Vogel is one member whose career is profiled on our Web site, Career Profiles in Nursing, at [www.nursingsociety.org/career](http://www.nursingsociety.org/career). Visit the site today to ask these nurses questions through e-mail and explore the world of nursing. If you are interested in being featured on this site, please visit [www.nursingsociety.org](http://www.nursingsociety.org) for an application. Submission deadline is October 30.

# New Harris poll is sobering wake-up call for profession

By Nancy Dickenson-Hazard



A just-released national poll by Harris Interactive presents a sobering wake-up call for nurses everywhere. Despite our profession's far-ranging health care knowledge, the

poll shows that most consumers seldom look to nurses for advice on such important issues as elder care, women's health or childhood diseases. Instead, most of those polled rely on nurses for basic health care advice that's consistent with traditional nursing roles.

The national poll, sponsored by *Nursing Spectrum* and the Honor Society of Nursing, Sigma Theta Tau International, was based on telephone interviews with more than 1,000 adults aged 18 or over.

While the poll results show that nurses have carved out a respectable niche in providing health care advice to the public — principally through the traditional venues of office, school and hospital nursing — we clearly need to do a better job of reaching out to consumers and helping them with a

wider range of health care problems and concerns.

### The Traditional Nurse

Out of 30 potential areas of nursing involvement cited in the poll, it is stunning to note that nurses' advice was sought only in the four areas consistent with traditional nursing roles. According to the poll, the public is comfortable asking nurses about over-the-counter health care products, how to take care of themselves or loved ones after surgery, how to take prescription medicines and what types of side effects to expect, and how to interpret information provided by a physician.

For example, more than half (55 percent) of the respondents said they had queried a nurse about post-operative care. Also, more than half (53 percent) of the respondents had asked a nurse for advice about over-the-counter health care products that provide relief for pain, fever or allergies.

Respondents were also questioned about how often a nurse has helped them understand something a medical doctor has told them, including information about treatment options or a diagnosis. The majority (52 percent) responded "very often" and "sometimes."

A similar percentage of respondents said they had asked a nurse about how to take a particular drug (50 percent) and side effects of prescribed drugs (50 percent).

### Troublesome Findings

Although nurses are capable of providing a wealth of health care information, most of those surveyed said they did not seek expert nursing advice on care for the elderly, children's health issues, women's health issues, alternative therapies and certain aspects of medications.

The public also does not turn to nurses for advice on other important health-related issues including sexually transmitted diseases, sex education, abortion, and drug and alcohol use.

For instance, 59 percent of the women surveyed had not asked a nurse about birth control, 77 percent of women had not sought a nurse's advice about menopause and 81 percent of women had not consulted a nurse about osteoporosis.

### Implications

This poll clearly shows that nursing must find a way to make the public aware of the extensive health care knowledge nurses possess.

This is one of the issues being addressed by the Honor Society of Nursing and other professional organizations through aggressive media relations designed to get news and entertainment programs to more accurately portray nurses.

It's also a focus of Nurses for a Healthier Tomorrow, a coalition of 19 leading nursing and health care organizations that is launching a national advertising campaign to raise awareness of — and change the image of — the nursing profession in order to recruit and retain more nurses. (For more information on Nurses for a Healthier Tomorrow, visit [www.nursesource.org](http://www.nursesource.org).)

These findings should be a major concern for nurses everywhere who've worked hard to expand the role of our profession, increase our versatility and enhance our value in an increasingly complex health care system. It's time for nurses to have our voices heard and be counted among health care advisors consulted by the public.

Nancy Dickenson-Hazard, RN, MSN, FAAN, is the executive officer of the Honor Society of Nursing, Sigma Theta Tau International.

**Introducing** Sigma Theta Tau International's

## Online Literature Review for Nursing

THE FAST, EASY WAY TO KEEP UP WITH THE LATEST DEVELOPMENTS!

Clinical experts sift through more than 8,000 new articles each week listed in Medline®

... you receive concise e-mail bulletins identifying the must-see articles in your pre-selected areas of interest

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## How are we doing?

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### NURSES AND THE 'NET

➤ CONTINUED FROM PAGE 1

maintained by the American Nurses Association at [www.ana.org](http://www.ana.org), offers hypertext links to a variety of nursing publications.

There are other functional sites that provide direction. The University of Iowa site HardinMetaDictionary (HardinMD) at <http://www.lib.uiowa.edu/hardin/md/index.html> serves as an excellent springboard for information on a huge array of health topics. Their "Clean Bill of Health" feature sorts through some of the credibility issues.

### Explore Other Sources

Print articles such as this one provide another means of finding valuable Web sites. There are some Web sites that cover specialized topics such as rare diseases, spirituality in health care or bioethics.

### REHABILITATION NURSING

➤ CONTINUED FROM PAGE 1

critical daily living tasks independently and remains an inspiration to Kate.

"I like rehab nursing because it allows me to visualize the tremendous strength and tenacity of the patients. Dealing with and surviving something as daunting as a spinal cord injury and the overwhelming life changes it brings is a truly miraculous test of human will. It restores my faith in human beings. When I first started working at SCI, I thought that it would be depressing and sad. I was happy to discover it is usually exactly opposite," stated Kate.

Rehab nursing is practiced in a variety of settings. The most common are acute and subacute units. Other areas that allow a lot of autonomy are case management, insurance company management of catastrophic injury clients, workman compensation companies, legal nurse consulting, Paralyzed Veterans Association and the Multiple Sclerosis Foundation.

Once nurses have at least two years of rehab practitioner experience, two levels of national certification are available. "Our challenge is to get them interested in this area of practice," says Kathy. "If they stay a few years, they will stay forever."

For more information about rehabilitation nursing, please e-mail [marlene.s.ruiz@kp.org](mailto:marlene.s.ruiz@kp.org),



Rehabilitation nurses often instruct patients on how to care for themselves after an illness or disability.

[kathleen.dunn@med.va.gov](mailto:kathleen.dunn@med.va.gov), or [schreibe@rohan.sdsu.edu](mailto:schreibe@rohan.sdsu.edu).

Marlene Ruiz, RN, BSN, MA, is director of education and consulting services at Kaiser Permanente, San Diego, Calif.

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Forensic nurses merge nursing practice and the law

By Rita Colella

Historically, nurses always have had the ability to recognize needs and to take the leadership role in enhancing the quality of life. The specialty of forensic nursing is no exception.

Found in correctional facilities, courts and clinical settings, forensic nurses specialize in nursing practice and the law. Often forensic nurses work with domestic violence and rape victims and testify in court.

A SANE Program for Victims

Although nurses have been working with victims and the law for more than 20 years, the American Nurses Association (ANA) recognized forensic nursing as a specialty only as recently as 1995.

Currently, the largest sub-specialty of forensic nursing is Sexual Assault Nurse Examiners (SANEs). SANEs are trained in forensic evidence collection techniques, which include the identification of trauma utilizing a

colposcope, alternative light sources, photography and other sophisticated documentation methods. As nurses, SANEs are in a unique position to skillfully perform the forensic examination, as well as provide the victim with the emotional support needed to ease the victim during the healing process. The potential for further trauma is decreased with the SANE's technical skill and ability to interact empathetically with victims. Having a qualified SANE nurse on staff allows evidence to be collected in a sensitive, effective and technologically advanced method.

The goals of SANE intervention are uniform across the country. Key aspects of the forensic examination include:

- assessment of trauma;
- objective documentation of health history, victim's statement and history of the crime;
- assessment of biological, psychological and social risk of medical sequelae;



Specializing in nursing practice and the law, forensic nurses often work with domestic violence and rape victims and testify in court.

- collection and preservation of forensic data; and
- facilitation of victim control over assault issues.

As patient advocates, SANEs fulfill an ethical obligation to ensure that the victim has the opportunity to make an informed decision about treatment choices. This ensures that basic human

rights to dignity and privacy are protected.

Becoming a SANE

To practice as a SANE, one must be a registered nurse with documented continuing education in the forensic nursing evaluation of victims of sexual assault (SANE Standards, 1996). Most states have developed additional requirements specific to their state and counties. For instance, in 1998 the New Jersey attorney general published "The Standards for Providing Services to Survivors of Sexual Assault." These guidelines now provide a framework for SANEs to practice within a Sexual Assault Response Team (SART). The team is typically made up of a SANE, a rape crisis counselor and a member of law enforcement.

There are approximately 300 SANE/SART programs in operation across the United States. Since SANEs' education,

FORENSIC NURSING, PAGE 4

Career profiles in clinical practice

Name: Teresa Nimmer Vogel, RN, BSN

Title: Staff RN

Employer: Elmbrook Memorial Hospital, Covenant Healthcare Systems

Years in Nursing: 19



Teresa Nimmer Vogel

Three favorite aspects of job:

- Direct patient contact
- Positively influencing patients' health outcomes
- Educating patients and their families

Three challenging aspects of job:

- Having enough energy and time
- Securing adequate resources
- Keeping current with research and technology via conferences and seminars

Job description:

Medical telemetry, cardiopulmonary, oncology and general medical-surgical responsibilities.

Education:

- Nursing Diploma, 1981, Columbia College of Nursing
- BSN, 1991, Marquette University, Milwaukee, Wis.

Sigma Theta Tau Chapter:

- Delta Gamma Chapter

Best advice:

"Become vital and active members of your nursing organizations at the hospital, clinic and community at local, state or national levels. Make a difference for nursing."

How Sigma Theta Tau has shaped her career:

"Sigma Theta Tau International has been influential in shaping my leadership abilities. It has given me the knowledge, skills and confidence to chair performance improvement and quality assurance activities at a major teaching center; to become a mentor/preceptor to nursing students and new employees; and to participate as a board member in the local chapter. Through Sigma Theta Tau conferences, I have gained the knowledge and skills to actively pursue a career change within nursing. Sigma Theta Tau has also provided great exposure to other nurses from across the United States and around the world."

Teresa Nimmer Vogel is one member whose career is profiled on our Web site, Career Profiles in Nursing, at [www.nursingsociety.org/career](http://www.nursingsociety.org/career). Visit the site today to ask these nurses questions through e-mail and explore the world of nursing. If you are interested in being featured on this site, please visit [www.nursingsociety.org](http://www.nursingsociety.org) for an application. Submission deadline is October 30.

New Harris poll is sobering wake-up call for profession

By Nancy Dickenson-Hazard



A just-released national poll by Harris Interactive presents a sobering wake-up call for nurses everywhere. Despite our profession's far-ranging health care knowledge, the

poll shows that most consumers seldom look to nurses for advice on such important issues as elder care, women's health or childhood diseases. Instead, most of those polled rely on nurses for basic health care advice that's consistent with traditional nursing roles.

The national poll, sponsored by *Nursing Spectrum* and the Honor Society of Nursing, Sigma Theta Tau International, was based on telephone interviews with more than 1,000 adults aged 18 or over.

While the poll results show that nurses have carved out a respectable niche in providing health care advice to the public — principally through the traditional venues of office, school and hospital nursing — we clearly need to do a better job of reaching out to consumers and helping them with a

wider range of health care problems and concerns.

The Traditional Nurse

Out of 30 potential areas of nursing involvement cited in the poll, it is stunning to note that nurses' advice was sought only in the four areas consistent with traditional nursing roles. According to the poll, the public is comfortable asking nurses about over-the-counter health care products, how to take care of themselves or loved ones after surgery, how to take prescription medicines and what types of side effects to expect, and how to interpret information provided by a physician.

For example, more than half (55 percent) of the respondents said they had queried a nurse about post-operative care. Also, more than half (53 percent) of the respondents had asked a nurse for advice about over-the-counter health care products that provide relief for pain, fever or allergies.

Respondents were also questioned about how often a nurse has helped them understand something a medical doctor has told them, including information about treatment options or a diagnosis. The majority (52 percent) responded "very often" and "sometimes."

A similar percentage of respondents said they had asked a nurse about how to take a particular drug (50 percent) and side effects of prescribed drugs (50 percent).

Troublesome Findings

Although nurses are capable of providing a wealth of health care information, most of those surveyed said they did not seek expert nursing advice on care for the elderly, children's health issues, women's health issues, alternative therapies and certain aspects of medications.

The public also does not turn to nurses for advice on other important health-related issues including sexually transmitted diseases, sex education, abortion, and drug and alcohol use.

For instance, 59 percent of the women surveyed had not asked a nurse about birth control, 77 percent of women had not sought a nurse's advice about menopause and 81 percent of women had not consulted a nurse about osteoporosis.

Implications

This poll clearly shows that nursing must find a way to make the public aware of the extensive health care knowledge nurses possess.

This is one of the issues being addressed by the Honor Society of Nursing and other professional organizations through aggressive media relations designed to get news and entertainment programs to more accurately portray nurses.

It's also a focus of Nurses for a Healthier Tomorrow, a coalition of 19 leading nursing and health care organizations that is launching a national advertising campaign to raise awareness of — and change the image of — the nursing profession in order to recruit and retain more nurses. (For more information on Nurses for a Healthier Tomorrow, visit [www.nursesource.org](http://www.nursesource.org).)

These findings should be a major concern for nurses everywhere who've worked hard to expand the role of our profession, increase our versatility and enhance our value in an increasingly complex health care system. It's time for nurses to have our voices heard and be counted among health care advisors consulted by the public.

Nancy Dickenson-Hazard, RN, MSN, FAAN, is the executive officer of the Honor Society of Nursing, Sigma Theta Tau International.

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NURSES AND THE 'NET

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REHABILITATION NURSING

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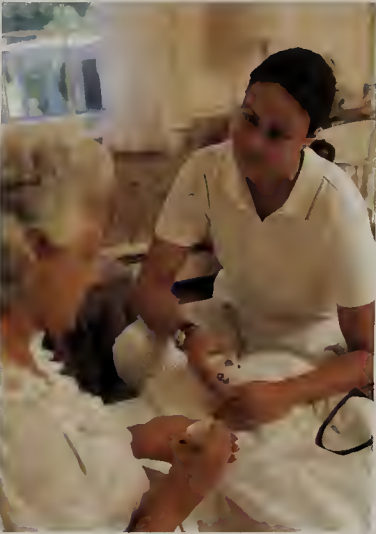
critical daily living tasks independently and remains an inspiration to Kate.

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Rehabilitation nurses often instruct patients on how to care for themselves after an illness or disability.

[katbleen.dunn@med.va.gov](mailto:katbleen.dunn@med.va.gov), or [schreibe@rohan.sdsu.edu](mailto:schreibe@rohan.sdsu.edu).

Marlene Ruiz, RN, BSN, MA, is director of education and consulting services at Kaiser Permanente, San Diego, Calif.

Transcultural and Multicultural Health Links Web page at [www.lib.iun.indiana.edu/trannurs.htm](http://www.lib.iun.indiana.edu/trannurs.htm). This Web site provides dozens of resources that can help you provide sensitive care to a patient from an exotic foreign culture or a religious background with which you are not familiar.

And speaking of respect for human dignity, how about bioethics sites? One of the most comprehensive approaches is provided by The University of Pennsylvania's Bioethics.net site at [www.med.upenn.edu/~bioethic/](http://www.med.upenn.edu/~bioethic/). It includes a basic introduction to bioethics and items about bioethics in the news. One of the features reviews the bioethics issues in the television program E.R. The Nursing Ethics Network at [www.bc.edu/bc\\_org/avp/son/ethics/nen.html](http://www.bc.edu/bc_org/avp/son/ethics/nen.html) offers reports of nursing ethics research projects.

Finally, if you have had a bad day and are in need of a giggle, try looking at the jokes at [www.allnurses.com/](http://www.allnurses.com/)

Nursing Humor/Nursing/.

The Internet is an extraordinary resource for nurses in all practice settings. Building your comfort level in maneuvering through the vastness of cyberspace will benefit you, your patients and every aspect of your clinical practice.

As you view the online version of this article at [www.nursingsociety.org](http://www.nursingsociety.org), click on the links listed throughout the article to access the sites directly.

Cheryl Hall Harris, RN, BSN, experience includes twenty years in newborn intensive care, five years providing ethics education primarily to nurses and more than thirty years writing for publication. She currently works full time as a freelance writer.

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## STUDENT PERSPECTIVE

➤ CONTINUED FROM PAGE 1



Wan Hyuck Kim with a fellow graduate student

same diagnosis; they are viewed as unique, individualized and diversified human beings. Certainly, this can most effectively

be accomplished when nurses care for a smaller number of patients.

I also was impressed by the well-organized hospital and its support of effective nursing care. For example, nurses in the United States may check vital signs with an automatic machine every 15 to 30 minutes. In Korea, that equipment is only available in the special care unit, making it impossible to check vital signs so frequently. Even small medical devices such as syringes and IV cannula are designed to support nursing

care of the patient. Without that equipment, even simple procedures become involved and time consuming. I even discovered that patients may choose their own menus and desserts; nurses then fax it to dietary!

On the other hand, I see dramatic differences in the cost of health care. Despite the advanced nursing care in the United States, I was really surprised at the cost of health care here compared with Korea. Based on my experience, I believe that health care cost must be affordable for anyone—even under capitalism—because health is a human right. I believe that the health care system, social welfare, insurance and governmental efforts should make affordability and quality care of critical importance.

Witnessing these differences in health care costs, equipment availability and nurse to patient ratios during the six-week internship, I gained unique insight into nurses from two cultures—Korean and American.

Wan Hyuck Kim is an MPH student at the SDSU Graduate School of Public Health.

## Recognizing the best: Regional awards to be presented

Creative and scholarly contributions to nursing benefit nurses and the patients they serve worldwide. To recognize outstanding accomplishments, the society presents the biennial regional awards. The following awards will be presented to recipients from seven geographical regions.

- Media Awards (print, electronic, photography and art)
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- Chapter Research Advancement Award
- Chapter Heritage Award
- Innovative Chapter Award
- Mentor Award

Recipients will be recognized during the 2001 Professional Development Conference and Chapter Leader Academy. Award winners may accept their awards at any one of these Professional Development Conference and Chapter Leader Academy sites: Orlando on January 26-27; San Francisco on February 23-24; Philadelphia on March 23-24; or Chicago on April 27-28.

To be considered for a 2000-2001 award, submissions must be received by October 15, 2000. For information about eligibility, specific criteria and submission requirements, visit [www.nursingsociety.org](http://www.nursingsociety.org) or call Frank Maez at 1.888.634.7575.

## FORENSIC NURSING

➤ CONTINUED FROM PAGE 2

clinical experience, life experience and local protocols differ, each program has its idiosyncrasies. SANEs also practice in varied clinical settings. Programs are conducted in conjunction with local hospitals, women's health centers, freestanding centers, Planned Parenthood and prosecutors' offices. Nevertheless, the premise that SANEs adhere to the Standards of Clinical Nursing Practice established by the American Nurses Association is imperative for purposes of prosecution. Each forensic examination must meet the standards of assessment, diagnosis, outcome, identification, planning and implementation.

Rita Colella, RN, BSN, is the coordinator for the Union County, New Jersey, Sexual Assault Nurse Examiner.

## Nursing coalition expands membership



Nurses for a Healthier Tomorrow  
[www.nursesource.org](http://www.nursesource.org)

Promoting public understanding of nursing's contributions to meeting the critical human need for quality health care.

Nurses for a Healthier Tomorrow (NHT), a coalition of leading nursing and health care organizations including the Honor Society of Nursing, has added its nineteenth member—the National Association of School Nurses (NASN). With more than 10,000 members, the NASN will help strengthen the coalition's commitment to attract people to nursing, as well as promote public understanding of nursing's contributions.

"School nurses can have a significant impact on recruitment to the profession," said Judith Robinson, RN, PhD, executive director of NASN. "We look forward to helping NHT distribute information to middle and high school students and encourage students to consider nursing."

NHT has also received a donation of \$250,000 in research and creative services from JWT Specialized Communications and a \$100,000 grant,

plus an additional \$100,000 contingent pledge for 2001, from the Helene Fuld Health Trust. These contributions will help create and place a national advertising campaign designed to recruit new nurses and convince existing ones to remain in the profession.

With Luci Baines Johnson and Elizabeth Dole serving as honorary chairs, NHT was formed in response to the shortage of nurses in the United States. Rather than wait until the problem is severe and patients are at risk, NHT is working now to increase awareness about the shortage and the excellent opportunities for those who seek a nursing career.

More information about NHT and a list of members can be found at <http://www.nursesource.org>.

## Excellence available online

Excellence articles are available at [nursingsociety.org/publications/excellence.html](http://nursingsociety.org/publications/excellence.html). Don't miss these articles:

### Excellence in Nursing Administration:

- Achieving positive results during change
- Delivering culturally competent care
- Managed care: How it's affecting health care
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- Rehabilitation nursing: Another increasing shortage
- Nurses and the 'net: The Internet resource for clinicians
- Nursing: An international student's perspective
- Forensic nursing
- Nursing coalition expands membership

### Excellence in Nursing Education:

- On the rise: Are grades where they should be?
- Tapping into technology: The future of electronic theses and dissertations
- Nursing research congress to be held in Denmark
- Nursing coalition expands membership

If you did not select one of these three versions, you automatically received *Excellence in Clinical Practice*. You may still select a customized version of the January issue by calling our Member Service Center at 1.888.634.7575 or e-mailing: [marketing@sti.iupui.edu](mailto:marketing@sti.iupui.edu). Select only one version to receive in the mail and please include your member number in your response.



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"It's Your Career: Take Charge" which includes a workshop participant workbook and a trainer guide for nurses who wish to conduct workshops and offer career coaching. They will be piloting the materials in South Africa in December 2000 and in Sweden, March 2001.

**Maureen Mackle-Reid** has recently accepted an appointment as Assistant Professor, School of Nursing, McMaster University, and Hamilton.

**Linda McGillis Hall** and **Elizabeth Peter** have recently accepted appointments as Assistant Professors, Faculty of Nursing, University of Toronto.

### ***Publications/Presentations***

Esplen, M.J., Toner, B., Hunter, J., Glendon, G., Narod, S., Liede, A., Butler, K., Field, B., Stuckless, N. (2000), A supportive-expressive group intervention for women with a family history of breast cancer: Results of a pilot study. Psych.Oncology, 9(3), 243-252,

Everett, B. & Gallop, R. (2001) The link between childhood trauma and mental illness: effective interventions for mental health professionals. Thousand Oaks, California: Sage Publications. Inc. (available now)

Irvine, D., Sidani, S, Porter, H., O'Brien-Pallas, L., Simpson, B., McGillis Hall, L., Graydon, J., DiCenso, A., Redelmeir, D., Nagel, L. (2000), Organizational factors influencing nurse practitioners' role implementation in acute care settings. Canadian Journal of Nursing Leadership, 13(3), 28-35.

McGillis Hall, L. & O'Brien-Pallas, L. (2000), Redesigning long-term care environments. Nursing Economics, 18(2), 79-87.

McGillis Hall, L., Pink, G., Johnson, L., Schraa, E. (2000), Developing a nursing management practice atlas. Part 1: Methodological approaches to ensure data consistency. Journal of Nursing Administration, 30(7/8), 364-372.

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Sidani, S., Irvine, D, Porter, H., O'Brien-Pallas, L., Simpson, B., McGillis Hall, L., Nagel, L., Graydon, J., DiCenso, A., Redelmeir, D., (2000), Practice patterns of acute



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Watt-Watson, J., Stevens, B., Costello, J., Katz, J., Reid, G. (2000), Impact of preoperative education on pain management outcomes after coronary artery bypass graft surgery: A pilot. Canadian Journal of Nursing Research, 31, (4), 41-56

Watt-Watson, J., Garfinkel, P., Gallop, R., Stevens, B., Streiner, D. (2000), The impact of nurses' empathetic responses on patients pain management in acute care. Nursing Research, 49,1-10.

Watson, C, & Watt-Watson, J., (2000), Treatment of neuropathic pain: Antidepressants and opioids. Pain Research and Management, 4,168-178.

Watt-Watson, J., Listening and Believing: Sprint versus Marathon. Plenary, Canadian Pain Society Scientific Meeting, May 11-13,2000, Banff, Alberta

Watt-Watson, J. Pain Management: Is patient involvement necessary? Plenary, Australian Pain Society Scientific Meeting. March 19-23, 2000, Melbourne, Australia.

Watt-Watson, J. Pain, Power and Passion. Australian Nursing Conference. Keynote Speaker in conjunction with the Australian Pain Society Scientific Meeting. March 19-23, Melbourne, Australia.

Wells, D. & Dawson, P. (2000) Description of retained abilities in older persons with dementia. Research in Nursing and Health, 23: 158-166.

Wells, D., Dawson, P., Sidani, S., Craig, D. Pringle, D. (2000) Effects of an Abilities-focused program of nursing care on residents who have dementia and on caregivers. JAGS, 48:44-449.

### ***Why Wait Till Spring?***

### ***We Need Nominations NOW For Community Leaders in Nursing!***

The Annual Induction Ceremony will be held in the spring, but it is already time for us all to begin thinking about nominations for membership in Lambda Pi Chapter, Sigma Theta Tau International. Individuals may be invited to apply for membership in one of two ways: as nursing students or as community nursing leaders. We need the assistance of our members to identify candidates in the latter category.

The purpose of the Community Leader designation for STT membership is to recognize leadership, creative work, support for professional standards and commitment to scholarly nursing. Nurses with a minimum of a baccalaureate degree who have demonstrated marked achievement in education, practice, research, administration or publication are eligible candidates. The majority has degrees in nursing but consideration is given to registered nurses with degrees in other fields if achievement in nursing is exceptional. It is expected that generic graduates be given five years to develop as community leaders. Exception can be made to this stipulation if the potential member has made an outstanding contribution.

Community Leaders may be: outstanding clinicians, active contributors to professional nursing organizations, inspiring educators, researchers who conduct exemplary studies, administrators who promote the improvement of health care, or the authors of books, articles, newsletters or reports which contribute to dissemination of knowledge in nursing. Do you know someone who fits one or more of these categories?

**Your recruitment efforts are crucial!** Community Leaders will only become members if they are nominated and encouraged to join by chapter members. If you would like to nominate someone for membership in Lambda Pi, Sigma Theta Tau, see below for contact information and forms.

### ***Announcements***

#### **Lambda Pi chapter is accepting nominations for Community Leader Membership.**

Prospective applicants must be nurses with a minimum of a baccalaureate degree who has demonstrated marked achievement in education, practice, research, administration or publication.

Applicants must be submitted by February 9, 2001.  
Please call 416-979-5300 to receive an application package.

#### **Announcing the 2001 STT Excellence Awards**

In order to recognize and promote the advancement of nursing through excellence, STT presents awards in clinical practice, education, nursing leadership and research.

A process for nomination, selection and presentation of these awards has been developed and is available to STT members through the STT office at Ryerson Polytechnical Institute.

Please call 416-978-5300 to receive a copy of the selection criteria



### ***Lambda Pi Chapter Awards of Excellence 2000-2001***

Linda McGillis Hall, Director-at-Large (Awards) presented the Lambda Pi Awards of Excellence and the Research Award at the conclusion of The Faculty of Nursing Research Day, 2000 in April. The awards were presented to nurses recommended by their peers for significant accomplishment in nursing research, education, practice or administration. Congratulations are extended to the following award recipients.

#### ***Award for Excellence in Nursing Administration***

**Joan Edwards**, Chief Nursing Officer of the University Health Network. Joan is well recognized across Canada and internationally for her contributions to enhance professional practice for nursing.

#### ***Award for Excellence in Nursing Practice***

**Sue Calabrese**, Baycrest Centre for Geriatric Care. Sue was nominated by a colleague, peers, administrators and patients who recognized her contributions to direct patient care at the centre.

#### ***Award for Excellence in Nursing Education***

**Dr. Judy Watt-Watson**, PhD., Associate Professor, at the Faculty of Nursing, University of Toronto. Dr. Watt-Watson was nominated by peers and students who provided heartwarming accolades on "what a pleasure Judy was to work with" and "what a rare individual that she was with "an exceptional teaching and knowledge base".

#### ***Dorothy M. Pringle Award of Excellence in Nursing Research***

**Dr. Diane Irvine**, PhD., Assistant Professor, at the Faculty of Nursing, University of Toronto. Dr. Irvine is well known for her work on continuous quality improvement practices for nursing and has taken a leadership role in the development of nurse-sensitive outcomes for nursing.

#### ***Award of Merit for an Outstanding PhD Thesis***

**Dr. Jenny Ploeg** was acknowledged for an exceptionally well-written and complex thesis titled: *The Process of Community Development with Seniors: An Ethnographic Study*. Dr. Ploeg is the first recipient of this award.

#### ***Award of Merit for a Student Who Makes an Outstanding Contribution to Clinical or Administrative Practice During the MN program***

**Carol Taub**, RN, MN, who was nominated by a Lambda Pi member who supervised Carol in the agency in which she completed a graduate clinical practicum.

#### ***2000 Research Grants Program***

**Elizabeth Peter** for her research titled: *Home Care Ethics: Historical Perspectives in Nursing*.



***Sigma Theta Tau  
Lambda Pi Chapter  
Member News Form***

We at Lambda Pi chapter are delighted to hear about member's achievements, appointments, publications and awards. We are pleased to carry announcements of such items in the "*Members on the Move*" or "*Chapter News*" or "*Publications*" sections of the newsletter. Please use this form to notify us of your accomplishments. Thank-you.

Name: \_\_\_\_\_ Credentials: \_\_\_\_\_  
Permanent Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Business Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_  
Current Chapter(s) Affiliation: \_\_\_\_\_  
University of Your Respective Chapter(s): \_\_\_\_\_  
Message: \_\_\_\_\_

***Return to: Kate Hardie  
Faculty of Nursing, University of Toronto.  
50 St. George St. , Toronto M5S 3H4  
Fax: 416-978-8222***

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